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DATE: January 13, 2006

TO: Examiner Ruth S. Smith
TC Art Unit: 3737

Fax No.: (571) 273 8300

FROM: Thomas O. Hoover

No. of pages transmitted
(including this page): 2

Our File: NLI-001AX

Time:

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Sent by: Tanya

Application No. 08/745,509

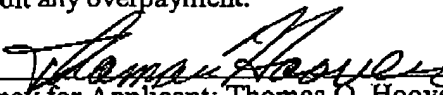
Filed Date: 11/12/96

Confirmation No.: 6390

A confirmation copy of this transmission will not be mailed unless the following is checked: ☐
MESSAGEPLEASE DELIVER DIRECTLY TO:
EXAMINER Smith, Tel. (571) 272 4745
TC ART UNIT NO: 3737**FOR ENTRY**

Enclosed for filing please find a: Notice of Appeal

The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional filing fees associated with this communication or credit any overpayment.


Attorney for Applicant: Thomas O. Hoover
Registration No. 32,470

331397

THIS MESSAGE MAY CONTAIN CONFIDENTIAL OR PRIVILEGED INFORMATION INTENDED ONLY FOR THE PERSON(S) IDENTIFIED ABOVE. IF IT HAS BEEN RECEIVED AT ANY OTHER PLACE OR HAS NOT BEEN CLEARLY RECEIVED, PLEASE CALL THE ABOVE IDENTIFIED SENDING PARTY COLLECT FOR INSTRUCTIONS. DO NOT SHOW OR DISTRIBUTE THIS MESSAGE TO ANYONE OTHER THAN THE INTENDED RECIPIENT(S). THANK YOU.

Rev. 09/03

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JAN 13 2006

01/17/2006 STEUMEL1 00000022 230804 08745509

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Date: January 13, 2006

Attorney
Docket No.: NLI-001AX

NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF APPEALS

In re application of: Feld et al.

Entitled: RAMAN ENDOSCOPE

VIA FACSIMILE

Sir:

Applicant hereby appeals to the Board of Appeals from the decision dated July 14, 2005 of the Examiner finally rejecting claims 29-34 and 36-38.

The Commissioner is authorized to charge payment of \$500.00 to Deposit Account No. 23-0804 for the cost of the Notice of Appeal.

The following checked items are appropriate:

A timely response to the final rejection:

☐ has been filed ☐ is hereby filed

An extension of time to respond to the final rejection:

1. ☐ was requested on _____ for ____ month(s);
 2. ☒ is hereby requested for 3 month(s) the Commissioner is authorized to charge payment of \$1,020.00 to Deposit Account No. 23-0804.
 3. ☐ is included on the enclosed amendment transmittal form along with a check in the amount of \$_____ for the extension fee.
- ☐ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
- ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under \$1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Ruth S. Smith, TC Art Unit 3737, Fax No. (571) 273 8300 *January 13, 2006*

Thomas O. Hoover
Attorney of Record: Thomas O. Hoover
Registration No.: 32,470

TOH/trb
331395-1